## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000014860 (6)

1ST NATIONWIDE FUNDING, INC.

## FILED Apr 16 1998 8:00am Secretary of State

10174						
Principal Place of Business Mailing Address						<b>13</b> 184 11 <b>3</b> 11 01091 18140 01411 0011 4001
1000 71ST ST		1000 71ST STREET				
MIAMI BEACH		MIAMI BEACH FL 33141				
					DO NOT WRITE IN THIS SPACE	
				•	3. Date Incorporated or Qualified	
6 Dringle of D	lace of Business	2a. Mailing Address			02/16/1996 4. FEI Number	Applical Co.
	lace of Business	—i			65-0641454	Applied For Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				\$9.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State	6	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country Zip Cou		Coun	lry	8. This corporation owes or has paid	
24	25				Personal Property Tax due June 30. 🔲 Yes 🕡 No	
<del></del>	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Regi	stered Agent
	UJILLO, JAMAIS		ľ	Name		
	00 71ST STREET		82 Street Ad		ess (P.O. Box Number is Not Acceptable	)
MIA	AMI BEACH FL 33141		83			
			*	13		
			ε	4 City		85 Zip Code
		500 1007 1000 EL 11 D		<u> </u>		FL 89 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered	auent and title if annicable (NOT	L: Registered /	Agent signature requir	pd when reinstaing)	DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	PSTD	☐ DELETE	1.1 T(TE	£		Change Addition
NAME	11.001		1.2 NAM	E		
STREET ADDRESS	1010 1111 1111		1.3 STR	ET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33141		1.4 CITY	- ST- ZIP		
TITLE		DELETE	2.1 T(TL)	<u> </u>		Change Addition
NAME	2.		2.2 NAM	E		
STREET ADDRESS			2.3 STR	ET ADDRESS		
CITY-ST-ZIP		Clerite		(-ST-ZIP		Otana District
TITLE		DELETE	3.1 TITL			Change Addition
NAME			3.2 NAM			
STREET ADDRESS				ET ADDRESS		:
CITY-ST-ZIP		DELETE	3.4. CIT	/-ST-ZIP		Change Addition
TITLE NAME		[] DELETE	4.1 HILL	1		E change E redition
STREET ADDRESS				ET ADDRESS		
•			4.3 STR			
CITY-\$T-ZIP		DELETE	5.1 TITE			Change Addition
NAME			5.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			5.4 City	Į.		
TITLE		DELETE	6.1 TITL			Change Addition
NAME			6.2 NAM	E		
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY			
14 I bereby o	certify that the information supplied	with this filing does not qualify for	or the exen	nption stated in	Section 119.07(3)(i), Florida Statutes, I fu	rther certify that the information
officer or a	director of the corporation or the re or Block 13 if changed, or duan a	niar annual report is true and according to trustee employeed to trachment with an address.	execute thi	s report as requ	re shall have the same legal effect as if muired by Chapter 607, Florida Statutes; an	nd that my name appears in